

**VILLAGE OF BABYLON
BOARD OF TRUSTEES HEARING**

PROCEDURE FOR A SPECIAL PERMIT OR RELAXATION OF ZONING REQUIREMENTS. (Only owners of property or contract vendees can apply for any action covered by this form. All others must have consent of owner affixed to form.)

- 1. DEED of the property affected by the application showing Metes and Bounds description and Tax Map # (1copy)**
- 2. CONTRACT if applicant is not owner, along with a written consent from owner. (1copy)**
- 3. Copy of present CERTIFICATE OF OCCUPANCY (non-vacant land only). This may be obtained from the Building Department.**
- 4. LIST (by Tax Map #) all property owners and their addresses within 200 feet of the subject property. If the applicant owns or has interest in property contiguous to the subject parcel, such distance shall be measured from the perimeter of such contiguous property. (Supplied by Village Clerk's Office)**
- 5. PROPERTY SURVEY (7 copies) containing:**
 - A. Property lines with dimensions and area of property.**
 - B. Location and size of existing structures, if any.**
 - C. Names of adjoining streets.**
 - D. North arrow, scale and petitioner's name.**
- 6. FEE as approved by the Board of Trustees (\$250)**
- 7. You must submit 7 copies of a detailed drawing to scale showing the interior layout of the proposed use, including interior wall, tables, chairs, counters, etc. when application is submitted. Be certain the initial plan has been reviewed by the Building Department and any necessary permits are obtained.**

If a CHANGE OF ZONE is being requested a verified petition must be submitted to the Board of Trustees along with the above, and in some cases submission to the Planning Board must be done before acceptance to the Board of Trustees.

ALL THE ABOVE MUST BE SUBMITTED WITH COMPLETED APPLICATION TO THE VILLAGE CLERK AT LEAST ONE (1) WEEK PRIOR TO A SCHEDULED BOARD OF TRUSTEES MEETING.

Date for PUBLIC HEARING will be set at a scheduled Board of Trustees meeting. Publication of Hearing in local newspaper ten (10) days before the hearing will be done by the Village Clerk.

AFTER THE BOARD SETS THE DATE FOR THE HEARING YOU MUST DO THE FOLLOWING:-

- 1. NOTIFY each property owner and resident within 200 feet of the subject parcel on list supplied by the Village Clerks Office. Must send photocopy of legal notice to each property owner in a stamped envelope with the return address:**

VILLAGE CLERK'S OFFICE, 153 WEST MAIN STREET, BABYLON NY 11702. (This should be done 10 days before hearing date.) Mailings are to be given to the Village Clerk's Office and we will mail them out.

- 2. POST NOTIFICATION SIGN - The Village is providing the sign that must be posted on the applicant's property at least 10 days prior to the meeting. The initial cost of each sign will be \$50.00, with a 50% refund which will be mailed to the applicant within one month upon return of the sign with their voucher. You will receive a phone call when your sign is ready for pick-up.**
- 3. AFFIDAVIT OF POSTING (attached) must be completed and returned to the Village Clerk prior to Public Hearing. If sign is not posted 10 days in advance, the Public Hearing will be cancelled. (Village Board holds Public Hearing)**
- 4. VILLAGE BOARD decides on the application at a regularly scheduled meeting.**
- 5. APPLICANT IS NOTIFIED of the Village Boards decision.**

**BOARD OF TRUSTEES
VILLAGE OF BABYLON**

**SPECIAL PERMIT ADDENDUM
RESTAURANTS, BARS, ALCOHOLIC BEVERAGES, ETC.**

**APPLICANT NAME AND
ADDRESS:**_____

PREMISES ADDRESS:_____

NAME OF PRINCIPAL IF CORPORATION:_____

PHONE NUMBER:_____

1. Are the premises within 200 feet of a building occupied exclusively as a school, church, synagogue or other place of worship?_____

A. If yes please describe and locate distances_____

B. Are premises licensed by the Alcoholic Beverage Control Board?_____
LICENSE #_____

2. Do said premises comply with all applicable building, fire, and health laws, ordinances and regulations for said intended use?_____

If not, specify the areas of non-compliance and the work to be done in order to so comply._____

3. Has an appropriate Board of Health permit been issued for said premises?_____ **If so, state number thereof, date of issuance and by whom issued.**_____

4. Is any dancing, music or entertainment to be provided at any time whatsoever for guests or customers on the premises?_____

If so, please specify nature thereof_____

5. Is any bar, counter or similar contrivance maintained in said premises, at which alcoholic beverages will be sold?_____

If so, give exact location and length,_____

6. If food is to be served please specify the number of tables and chairs to be used on the premises. If any counter service, list the number of people that can be seated at said counter_____

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7. Please list the days of the week and the hours of each day that said premises will be open for business.

	OPEN	CLOSED	HOURS
SUNDAY			_____TO_____
MONDAY			_____TO_____
TUESDAY			
			_____TO_____
WEDNESDAY			
			_____TO_____
THURSDAY			
			_____TO_____
FRIDAY			
			_____TO_____
SATURDAY			
			_____TO_____

8. Submit any additional facts that you feel the Board would wish to know in considering said application.

9. Please describe your operation:_____

NAME & TITLE OF PREPARER (of application):_____

SIGNATURE:_____

DATE:_____

**IN THE MATTER OF
APPLICATION OF**

NAME:

**AFFIDAVIT
OF
POSTING**

**STATE OF NEW YORK)
COUNTY OF SUFFOLK) SS:**

_____ Being duly sworn deposes and says:
1. That (s) he _____ is the applicant
herein/the _____ is the applicant herein.
(if Corporation give title)

2. That your deponent has posted or caused to be posted upon the property which is the subject of this application, a notice of the said application in the form annexed hereto.

3. That said notice was posted on the subject property on this _____ day of _____, 20____.

4. That said notice complies in all respects with the requirements, as to content, size, form, material, location and time of posting, elevation and length of time displayed.

5. That your deponent makes this **AFFIDAVIT KNOWING FULL WELL THAT THE TRUTH OF THE STATEMENTS CONTAINED HEREIN WILL BE RELIED UPON.**

Signature

Sworn to before me on

this _____ day of _____, 20____

NOTARY PUBLIC